

# IHCP *banner page*

INDIANA HEALTH COVERAGE PROGRAMS BR201117 APRIL 26, 2011



## **Correction: IHCP coverage of 17-alpha hydroxyprogesterone (17P) injections and Makena**

Recent Indiana Health Coverage Programs (IHCP) publication [BT201110](#), dated April 12, 2011, outlined IHCP coverage and reimbursement policies for compounded 17-alpha hydroxyprogesterone injectable (17P) products and the new brand-name drug product, Makena. A correction to the bulletin language follows:

Effective April 12, 2011, Makena is a noncovered therapy when billed on an *institutional* (not *medical*, as stated in BT201110) claim (UB-04) or professional claim (CMS-1500) billing form.

## **Package B diagnosis coding for family planning services**

Effective immediately, when billing family planning services for Hoosier Healthwise Package B members, please use the appropriate family planning diagnosis codes in the table on the next page.

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*Family planning diagnosis codes*

| <b>Code</b> | <b>Description</b>   |
|-------------|--|
| V25.01      | Prescription of oral contraceptives                                      |
| V25.02      | Initiation of other contraceptive measures                               |
| V25.03      | Encounter for emergency contraceptive counseling and prescription        |
| V25.04      | Counseling and instruction in natural family planning to avoid pregnancy |
| V25.09      | Other (family planning advice)   |
| V25.1       | Insertion of intrauterine contraceptive device                           |
| V25.2       | Sterilization  |
| V25.3       | Menstrual extraction   |
| V25.40      | Contraceptive surveillance, unspecified                                  |
| V25.41      | Contraceptive pill   |
| V25.42      | Intrauterine contraceptive device  |
| V25.43      | Implantable subdermal contraceptive                                      |
| V25.49      | Other contraceptive method   |
| V25.5       | Insertion of implantable subdermal contraceptive                         |
| V25.8       | Other specified contraceptive management                                 |
| V25.9       | Unspecified contraceptive management                                     |

**QUESTIONS?**

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